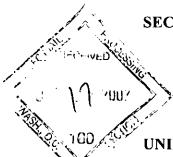
308282







UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

Amendment No. 27 to FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OCT 2 6 2007
THOMSUN
FINANCIAL

Name of Offering (check if this	is an amendment and name has changed, and indicat	te change.)
Lehman Brothers Enhanced Cash Fund Institut	ional Shares	-
Filing Under (Check box(es) that apply):	Rule 504 🔲 Rule 505 🔀 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing	Amendment	_
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the is	ssuer	
Name of Issuer (check if this is an amendm	ent and name has changed, and indicate change.)	
Lehman Brothers Enhanced Cash Fund	-	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Talanhara Number (Including Assu Code)
605 Third Avenue, New York, NY 10158	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) (212) 526-7000
- This rectac, new York, 197 10156		(212) 320-7000
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)		·
Brief Description of Business		1
	nent objective of providing safety of principal, a high	dogram of liquidity and a high layer of augment
income by investing in a diversified group of h	igh quality money market instruments and other short	et term obligations denominated in U.S. dellars
income by investing in a diversified group of it	ign quanty money market instruments and other shot	re-term congations denominated in 0.5, donars.
T		
Type of Business Organization		
corporate	<u>=</u> , ,, ,, ,	other (please specify):
■ business trust	limited partnership, to be formed	
	Month Year	
Actual or Estimated Date of Incorporation or C		Actual Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviation of	`State:
	CN for Canada: FN for other foreign jurisdiction)	D F

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501

et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

			Α.	BASIC IDENTIFI	CATI	ON DATA				
2. Enter the information req	uestec	for the foll	owing	:						
• Each promoter of the	issuer	, if the issue	r has l	peen organized with	in the	past five years;				
 Each beneficial owner securities of the issue 		ng the powe	r to v	ote or dispose, or d	lirect	the vote or disposit	ion of	, 10% or n	nore o	f a class of equity
 Each executive office 	r and	director of c	orpora	ite issuers and of co	rporat	e general and mana	ging p	artners of p	oartne	rship issuers; and
 Each general and mar 	naging	partner of p	artner	ship issuers						
Check Box(es) that Apply:	\boxtimes	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if Neuberger Berman Manageme		•								
Business or Resident Address	(Nu	mber and Str	eet, Ci	ty, State, Zip Code)						
605 Third Avenue, New York,	NY 1	0158								
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individ	lual)								
Rivkin, Jack										· · · · · · · · · · · · · · · · · · ·
Business or Resident Address 605 Third Avenue, New York,	•		eet, Ci	ty, State, Zip Code)						
Check Box(es) that Apply:		Promoter		Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individ	lual)								Transpired Later Control
Sundman, Peter		,								
Business or Resident Address	(Nu	mber and Str	eet, Ci	ty, State, Zip Code)	•					
605 Third Avenue, New York,	NY 1	0158								
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if Conti, Robert	indivic	lual)								· · · · · · · · · · · · · · · · · · ·
Business or Resident Address 605 Third Avenue, New York,	•		eet, Ci	ty, State, Zip Code)				,		
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individ	lual)							···	
Business or Resident Address	(Nu	mber and Str	eet, Ci	ty, State, Zip Code)						
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	indivio	lual)			·					
Business or Resident Address	(Nu	mber and Str	eet, Ci	ty, State, Zip Code)						
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individ	lual)					-			
Business or Resident Address	(Nu	imber and Str	eet, Ci	ity, State, Zip Code)						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING		 	
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in his offering? Answer also in Appendix, Column 2, if filing under ULOE.	Yes	No	
2. What is the minimum investment that will be accepted from any individual?	\$_10,000,000(1)		
3. Does the offering permit joint ownership of a single unit?	Yes ⊠	No □	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only			
Full Name (Last name first, if individual) Lehman Brothers Inc.			
Business or Residence Address (Number and Street, City, State, Zip Code) 399 Park Avenue, New York, NY 10022			
Name of Associated Broker or Dealer			
State in Which Person Listed Has Solicited or Intends to Solicit Purchases (Check "All States" or check individual States) [AL]	All St [HI] [MS] [OR] [WY]	ates [ID] [MO] [PA] [PR] [PR]	
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Name of Associated Broker or Dealer			
State in Which Person Listed Has Solicited or Intends to Solicit Purchases (Check "All States" or check individual States) [AL]	[OR]	[ID] [] [MO] [] [PA] []	
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Name of Associated Broker or Dealer			
State in Which Person Listed Has Solicited or Intends to Solicit Purchases (Check "All States" or check individual States) [AL]	All St [HI] [MS] [OR] [WY]	ates [ID] [MO] [PA] [PR] [PR]	

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify Shares of Delaware statutory trust)		
	Total	\$ 100 billion (2)	\$ 1,595,031,889
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	20	\$ 1,595,031,889
	Non-accredited Investors	0	\$ <u>0</u>
	Total (for filings under Rule 504 only)	20	\$ 1,595,031,889
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate		
	Transfer Agent's Fees		S <u>o</u>
	Printing and Engraving Costs	<u>D</u>	\$ <u>17,000</u>
	Legal Fees	<u>D</u>	\$ 50,000
	Accounting Fees	<u>E</u>	\$ <u>40,000</u>
	Engineering Fees		\$ <u>0</u>
	Sales Commissions (specify finders' fees separately)		\$ <u>0</u>
	Other Expenses (identify)	<u>D</u>	\$ <u>913,000</u>
	Total		\$ 1,020,000 (3)

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES AN	D USI	E OF PROCE	EDS					
	b. Enter the difference between the aggregate tion 1 and total expenses furnished in respon "adjusted gross proceeds to the issuer."	se to Part C - Question 4.a. This difference	e is th	ne 		\$ <u>99</u>	9,998,980,000			
5.	Indicate below the amount of the adjusted grused for each of the purposes shown. If the estimate and check the box to the left of the ethe adjusted gross proceeds to the issuer set forth	amount for any purpose is not known, fur stimate. The total of the payments listed mu	nish a	ın						
				Payments Officers, Directors of Affiliates	&		Payment to Others			
	Sales and fees			\$	_ 0	\$	(5)			
	Purchase of real estate			\$	□	\$				
	Purchase, rental or leasing and installation of ma	chinery and equipment		\$	□	\$				
	Construction or leasing of plant buildings and fac					\$				
	Acquisition of other business (including the valu offering that may be used in exchange for the ass issuer pursuant to a merger)	e of securities involved in this sets or securities of another		\$						
	Repayment of indebtedness			\$						
	Working capital			\$						
				\$		\$				
	Other (specify): Trading Capital			\$	🛛	\$				
	Column Totals Total Payments Listed (column totals added)			\$ S			(5)(2)			
	<u></u>	D. FEDERAL SIGNATURE					·			
sign info Issu	issuer has duly caused this notice to be signed by nature constitutes an undertaking by the issuer to ormation furnished by the issuer to any non-accre are (Print or Type)	furnish to the U.S. Securities and Exchange Co dited investor pursuant to paragraph (b)(2) of F Signature	mmiss	sion, upon writt		t of its				
Lel	man Brothers Enhanced Cash Fund	4000			10/10/	<i>V</i> 7				
Na	ne of Signer (print or Type)	Title of Signer (Print or Type)								
Pet	er E. Sundman	President								
(1) (2) (3)	Subject to reduction by the Investment Manage This is an estimated offering amount. The mini continuous offering. Item 5 reflects the amount The amounts stated are the estimated expenses	mum offering amount is \$10,000,000 and there of adjusted gross proceeds to this issuer based over the course of the offering.								
(4)	Aggregate Dollar Amount of Purchases is net of redemptions.									

ATTENTION

the Investment Manager otherwise agrees to return a portion of its fees pursuant to criteria set forth in the confidential offering documents.

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 16

(5) The Investment Manager will receive an advisory fee of 0.14% of its proportionate share of the average daily net assets of the portfolio, unless

		E. STATE SIGNATURE		
Is any party described in rule?	•	sently subject to an of the disqualification p	provisions of such	Yes No □ ⊠
		See Appendix, Column 5, for state response	onse.	
2. The undersigned issuer Form D (17 CFR 239.5		furnish to any state administrator of any equired by state law.	state in which this notice is fi	iled, a notice on
3. The undersigned issuer issuer to offerees	hereby undertakes to	furnish to the state administrators, upon	written request, information f	urnished by the
limited Offering Exem	ption (ULOE) of the	suer is familiar with the conditions that n state in which this notice is filed and undo ling that these conditions have been satis	erstands that the issuer claiming	
The issuer has read this no undersigned duly authorize		the contents to be true and has duly cause	d this notice to be signed on i	ts behalf by the
Issuer (Print or Type) Lehman Brothers Enhanced	Cash Fund	Signature	Date /0	116/07
Name (print or Type)		Title (Print or Type)	· · · · · · · · · · · · · · · · · · ·	
Peter E. Sundman		President		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 1 4 Disqualification under State ULOE Type of security and aggregate Intend to sell (if yes, attach explanation of offering price offered in state (Part C-Item 1) to non-accredited Type of investor and amount purchased in State investors in State waiver granted) (Part E-Item 1) (Part B-Item 1) (Part C-Item 2) Number of Number of Accredited Non-Accredited **Investors** State Yes No Amount Yes No Amount **Investors** AL ΑK ΑZ AR CA CO CT DE DC Shares of DE Statutory FL0 Х \$11,635,346 **\$**0 X GA HI ID Shares of DE Statutory IL Х 0 \$89,899,265 \$0 Х Trust INIA KS KY LA ME MD MA Shares of DE Statutory MI Х \$7,299,996 0 \$0 X Shares of DE Statutory MN \$0 \$83,000,000 X MS MO

				· · · · · · · · · · · · · · · · · · ·	APPENDIX		······································			
	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
MT										
NE										
NV										
NH										
NJ										
NM										
NY		х	Shares of DE Statutory Trust	11	\$1,403,197,282	0	\$0		х	
NC										
ND										
ОН								•		
OK										
OR				:						
PA										
RI										
SC										
SD										
TN										
TX										
UT					· · · · · · · · · · · · · · · · · · ·					
VT										
VA										
WA		ļ <u>.</u>								
WV	ļ	ļ					:			
WI							~ ~	7		
WY		<u> </u>					FN			
PR						<u> </u>	<u> </u>			